



## Summary of comments and responses received on the proposed language for Chapter 246-110 WAC (Total of 15 individuals commenting)

A quick-guide to viewing this report:

TOPIC			
Comment or concern area	<ul style="list-style-type: none"><li>Rationale for concern or support in comments received</li></ul>	Number of comment, and type of source (if known)	Response

Comments we propose accepting

4

Comments we do not propose taking further action on

5 - 11

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Comments we propose accepting			
<b>Concern about use of phrase “medically appropriate” in WAC 246-110-020 (2)</b>	<ul style="list-style-type: none"><li>Some appropriate actions may not fall under that qualification. Closing a facility, excluding a child, or investigating a disease outbreak are all public health actions, and not necessarily medically appropriate actions</li></ul>	1 comment from a local health jurisdiction	Agreed. The term will be changed to “appropriate actions”.
<b>Concern about wording on WAC 246-110-020 (2)(d) “infectious, exposed, or susceptible”</b>	<ul style="list-style-type: none"><li>It does not matter if someone is exposed to the disease who is not susceptible</li></ul>	1 comment from a local health jurisdiction	Agreed. The wording will be to “infectious, or exposed and susceptible”.

Comments we do not propose taking further action on			
Pink Eye and Head Lice			
<b>Removal of Conjunctivitis (Pink Eye) from list of contagious diseases that need to be reported to a health officer.</b>	<ul style="list-style-type: none"> <li>Highly contagious disease</li> <li>Young children’s close proximity to others</li> <li>Discomfort factor –which can distract from learning</li> <li>Potential cost of disease spread (i.e. when someone’s contacts need to be discarded due to contamination)</li> </ul>	5 non-supportive  (The responses seem to suggest they are coming from: 3 childcare centers, 1 health officer, and 1 school)	<p>There is confusion over the purpose of the rule. The contagious diseases listed in the rule are the conditions that schools and childcare centers <u>must</u> report to the health officer. The school or childcare can still have policies or guidance in place to manage other contagious diseases (like Conjunctivitis or Pediculosis). For instance, schools have a communicable disease guide which details management of Conjunctivitis and Pediculosis. Department of Early Learning has a rule (WAC 170-296A-3210) which requires childcare centers to have a plan which must include provisions for excluding or separating a child, staff person, or household member with drainage of thick mucus or pus from the eye. The American Academy of Pediatrics, the Centers for Disease Control and National Association of School Nurses do not recommend excluding children with head lice from school.</p> <p>The notifiable conditions rule (Chapter 246-101 WAC) does not include Conjunctivitis or Pediculosis.</p> <p>These two conditions did not meet the seven criteria.</p>
	<ul style="list-style-type: none"> <li>Not appropriate to refer this disease to a health officer</li> <li>Schools and childcare centers can still exclude these children</li> <li>This condition does not meet the 7 criteria</li> <li>Provide education and encourage parental support</li> <li>Should be managed per district policy and individualized guidance from the student's health care provider</li> <li>Reduces the unnecessary exclusion of students from school</li> <li>Allows the local health office to use limited resources for true public health issues</li> <li>Promotes the most effective management of the student's condition as directed by their health care provider</li> </ul>	3 supportive	

Pink Eye and Head Lice (continued)			
Removal of Pediculosis (Head Lice) from list of contagious diseases that need to be reported to a health officer.	<ul style="list-style-type: none"><li>• Highly contagious disease</li><li>• Young children’s close proximity to others</li><li>• Discomfort factor –which can distract from learning</li><li>• Wish to uphold pledge to families to send children home with head lice</li></ul>	4 non-supportive (The responses seem to suggest they are coming from: 3 childcare and 1 school)	(See Conjunctivitis above)
	<ul style="list-style-type: none"><li>• Lice is not an infectious illness, it is an infestation of a pest</li><li>• Schools and childcare centers can still exclude these children</li><li>• Not appropriate to refer this disease to a health officer</li><li>• This condition does not meet the 7 criteria</li><li>• Provide education and encourage parental support</li><li>• Should be managed per district policy and individualized guidance from the student's health care provider</li><li>• Reduces the unnecessary exclusion of students from school</li><li>• Allows the local health office to use limited resources for true public health issues</li><li>• Promotes the most effective management of the student's condition as directed by their health care provider</li></ul>	3 supportive	

Chicken Pox			
Continued inclusion of varicella (chicken pox) on the list of contagious diseases that need to be reported to a health officer	<ul style="list-style-type: none"> <li>Chicken pox is not on the list of notifiable conditions</li> <li>Schools and childcare centers can still exclude these children, and health officers can still intervene if there is an outbreak of significant proportions</li> <li>Concerns about increase in workload given the change of wording under WAC 246-110-020 (1). The new wording takes out the reference to an outbreak and refers to awareness of the contagious disease at the facility</li> </ul>	<p>2 comments of concern – of which one was identified as a local health jurisdiction</p>	<p>Varicella associated deaths are on the list of notifiable conditions in the rule (Chapter 246-101 WAC).</p> <p>Varicella met the 7 criteria.</p> <p>In <i>Strategies for the Control and Investigation of Varicella Outbreaks Manual, 2008</i> the second paragraph under the Recommendations section begins: “Identification of a single case of varicella should trigger appropriate intervention measures as such cases can be sources for potential outbreaks. Different settings may have specific internal guidelines for managing a single case of varicella (e.g., prisons [49]) and these guidelines should be observed to help prevent outbreaks in the particular settings.”</p> <p>Health officers are not required to take any action when a case or suspected case is reported to him/her. (See WAC 246-110-020 (2)).</p>

Tuberculosis			
Tuberculosis should be on the list of list of contagious diseases that need to be reported to a health officer	<ul style="list-style-type: none"> <li>Tuberculosis is often the subject of a public health disease investigation in a school or childcare settings</li> <li>Tuberculosis meets the 7 criteria</li> </ul>	<p>1 comment expressing concern that TB should be on the list (local health officer)</p> <p>1 corrective comment (noting it was not removed)</p>	Tuberculosis is on the list of contagious diseases that need to be reported to a health officer

Diarrheal Diseases			
<b>Concern about heading “Diarrheal diseases due to or suspected to be caused by an infectious agent” under WAC 246-110-010 (3)(b)</b>	<ul style="list-style-type: none"><li>The heading suggests childcare center or school staff can tell the source of causation of the diarrheal disease and they will not know. This puts a burden on non-medical staff to diagnose</li></ul>	1 comment from a local health jurisdiction	There is no expectation that school or childcare staff will diagnose contagious disease. This is called out in the last sentence of WAC 246-110-001.

School			
<b>Concern about wording of “school” definition under WAC 246-110-010 (8)</b>	<ul style="list-style-type: none"><li>The definition seems to equate physical structure with related activities</li></ul>	1 comment from a local health jurisdiction	This definition was vetted by Washington State School Directors Association – no interpretation problems were detected.



General Comments			
General comments on proposed rule changes (quotes)	<ul style="list-style-type: none"><li>• This is a huge step in the wrong direction</li><li>• Allowing children into child care centers with extremely contagious illnesses will lead to more illnesses for the child and teacher. Close proximity of children in centers means teachers are unable to control the spread of these diseases</li></ul>	2 non-supportive	The second comment does not allow us to determine precisely, which contagious disease omission is most troublesome. (See response on page 5)
	<ul style="list-style-type: none"><li>• Rule out of date and is no longer reflective of present-day public health practice</li><li>• This guidance is depended upon by school districts, childcare centers and public Health Officers; therefore, it is critical this rule is in alignment with current evidence and science based practice when identifying the purpose of these regulations, clarifying definitions and outlining the control of contagious disease in these settings</li></ul>	1 supportive	

Rule Making Process			
Comment on application of criteria	<ul style="list-style-type: none"><li>Criteria application should be accompanied by recommendations of expert bodies or documents</li></ul>	1 comment from a local health officer	The team who applied the 7 criteria was likely to be familiar with recommendations of expert bodies and/or some of the relevant research

Health Officer Role			
<b>Specify parameters around the Health Officer's consultation with the Secretary of Health (WAC 246-110-020 (3)(a)) when considering taking action</b>	<ul style="list-style-type: none"> <li>Consider further specifying "...for matters with interjurisdictional ramifications or that exceed local capacity."</li> </ul>	1 comment from a local health officer	<p>RCW 43.70.130(5) gives the secretary of health the authority to investigate outbreaks and epidemics of disease that may occur and advise local health officers as to measures to be taken to prevent and control the same.</p> <p>This same RCW gives the secretary other authority over the local health officers.</p>
<b>Concerns about issuing an order (WAC 246-110-020)</b>	<ul style="list-style-type: none"> <li>Consider changing the language to the use of an order only if "verbal direction and written correspondence are not effective or deemed unlikely to be effective in the judgment of the health officer, the principal or school superintendent so requests, or the health officer otherwise deems appropriate."</li> <li>Issuing an order may delay implementation of important action to control or eliminate the disease</li> </ul>	<p>1 comment from a local health officer</p> <p>1 comment from a local health jurisdiction</p>	<p>Health Officers do not necessarily have to issue an order, which is subject to legal enforcement, when they are able to get an agreement on the appropriate action steps which need to be taken to control or eliminate the spread of the disease.</p> <p>The intent of the written order is to make clear what the expectations are for all involved, it can be issued after implementation of the agreed action steps in order to expedite an immediate disease control/elimination response.</p>
<b>Reference to Health Officer</b>	<ul style="list-style-type: none"> <li>Need to add "or their designee" to all health officer references in the rule since some counties share health officers and others have other designated response staff</li> </ul>	1 comment from a local health jurisdiction	A health officer has the legal mandate for issuing orders and cannot delegate that responsibility to someone else.